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## BIB DATA SHEET

CONFIRMATION NO. 2930

<b>SERIAL NUMBER</b> 10/817,397	<b>FILING or 371(c) DATE</b> 04/02/2004 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3626	<b>ATTORNEY DOCKET NO.</b> 13981.594
<b>APPLICANTS</b> Frank L. Lordeman, Bentleyville, OH; Floyd D. Loop, Gate Mills, OH; Peter R. Osenar, Willoughby Hills, OH; Jay Zybelman, La Jolla, CA;				
<b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/18/2004				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /MICHAEL Acknowledged TOMASZEWSKI/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 30
<b>INDEPENDENT CLAIMS</b> 4				
<b>ADDRESS</b> Cameron K. Kerrigan Squire, Sanders & Dempsey L.L.P. 1 Maritime Plaza, Suite 300 San Francisco, CA 94111 UNITED STATES				
<b>TITLE</b> System and method for interlinking medical-related data and payment services				
<b>FILING FEE RECEIVED</b> 1166	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	